

Application Data Sheet

APPLICATION INFORMATION

Application Number::
Filing Date:: June 26, 2003
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD Disks::
Number of Copies of CDs::
Sequence Submission?::
Computer Readable Form (CRF)?:: No
Number of Copies of CRF::
Title:: A METHOD AND SYSTEM FOR
BIDIRECTIONAL DATA AND POWER
TRANSMISSION
Attorney Docket Number:: P1975USA
Request for Early Publication?:: No
Request for Non-Publication?:: Yes
Suggested Drawing Figure::
Total Drawing Sheets:: 15
Small Entity?:: Yes
Latin Name::
Variety denomination name::
Petition Included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: No

APPLICANT INFORMATION

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: James
Middle Name:: M.
Family Name:: Hair
Name Suffix:: III
City of Residence:: Cheyenne
State or Prov. of Residence:: Wyoming
Country of Residence:: US
Street of mailing address:: 7806 S. Milliron Road
City of mailing address:: Cheyenne
State or Province of mailing address:: Wyoming
Country of mailing address:: US
Postal or Zip Code of mailing address:: 82009

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Daniel
Middle Name:: L.
Family Name:: Greene
City of Residence:: Cheyenne
State or Prov. of Residence:: Wyoming
Country of Residence:: US
Street of mailing address:: 710 Golden Hill Street
City of mailing address:: Cheyenne
State or Province of mailing address:: Wyoming
Country of mailing address:: US
Postal or Zip Code of mailing address:: 82009

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 08968
Phone: 312-569-1000
Fax: 312-569-3000
E-mail Address: gcd@ipdocket.com

REPRESENTATIVE INFORMATION

Representative Customer Number: 08968

Representative Designation: Registration Number: Representative Name:

DOMESTIC PRIORITY INFORMATION

Application: Continuity Type: Parent Application: Parent Filing Date:

FOREIGN APPLICATION INFORMATION

Country: Application Number: Filing Date: Priority Claimed

ASSIGNEE INFORMATION

Assignee name:: Abet Technologies, LLC
Street of mailing address:: 9446 North Hamlin Avenue
City of mailing address:: Evanston
State or Province of mailing address:: Illinois
Country of mailing address:: US
Postal or Zip Code of mailing address:: 60203